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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	99629
	First Inventor or Application Identifier	Robert L. Cadoux
	Title	PUBLIC STOCK OFFERING METHOD
	Express Mail Label No.	EJ892665505US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 20] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]	<b>ACCOMPANYING APPLICATION PARTS</b>	
4. Oath or Declaration [Total Pages 7] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul></li></ul>	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)
		9. <input type="checkbox"/> English Translation Document (if applicable)
		10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
		11. <input type="checkbox"/> Preliminary Amendment
		12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
		13. <input checked="" type="checkbox"/> * Small Entity Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired
		14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
		15. <input type="checkbox"/> Other: .....

\* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_  
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>17. CORRESPONDENCE ADDRESS</b>			
<input type="checkbox"/> Customer Number or Bar Code Label		or <input checked="" type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)			
Name	Jonathan C. Parks, Esquire		
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Fax	(412) 355-6501		

Name (Print/Type)	Jonathan C. Parks	Registration No. (Attorney/Agent)	40,120
Signature		Date	1/26/00

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# FEE TRANSMITTAL

## for FY 2000


Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 345.00

### Complete if Known

Application Number  
Filing Date  
First Named Inventor Robert L. Cadoux  
Examiner Name  
Group / Art Unit  
Attorney Docket No. 99629

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																																																																
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number 11-1110</p> <p>Deposit Account Name Kirkpatrick &amp; Lockhart LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p>		<p>3. ADDITIONAL FEES</p> <table border="1"><thead><tr><th>Large Entity Code</th><th>Small Entity Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr><tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr><tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within second month</td><td></td></tr><tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within third month</td><td></td></tr><tr><td>118</td><td>1,360</td><td>218</td><td>680</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>128</td><td>1,850</td><td>228</td><td>925</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal</td><td></td></tr><tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing</td><td></td></tr><tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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<p>2. EXTRA CLAIM FEES</p> <p>Total Claims 19 - 20** = 0 X Fee from below =</p> <p>Independent Claims 2 - 3** = 0 X Fee Paid =</p> <p>Multiple Dependent =</p> <p>**or number previously paid, if greater; For Reissues, see below</p> <table border="1"><thead><tr><th>Large Entity Code</th><th>Small Entity Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>78</td><td>202</td><td>39</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>260</td><td>204</td><td>130</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>109</td><td>78</td><td>209</td><td>39</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="4">SUBTOTAL (2) (\$ - 0 -</td></tr></tbody></table>		Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	78	202	39	Independent claims in excess of 3		104	260	204	130	Multiple dependent claim, if not paid		109	78	209	39	** Reissue independent claims over original patent		110	18	210	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$ - 0 -																																																																																																																																													
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) Jonathan C. Parks	Registration No. (Attorney/Agent) 40,120	Telephone (412) 355-6288	
Signature 		Date 1/26/00	

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